


Form 990



Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

The organization may have to use a copy of this return to satisfy state reporting requirements

OMB No 1545-0047

2010

Open to Public Inspection

A For the 2010 calendar year, or tax year beginning 08-01-2010 and ending 07-31-2011

B Check if applicable

☐ Address change

☐ Name change

☐ Initial return

☐ Terminated

☐ Amended return

☐ Application pending

C Name of organization

AMERICAN ASSOCIATION FOR JUSTICE

Doing Business As

Number and street (or P O box if mail is not delivered to street address)

777 6TH STREET NW

Room/suite

City or town, state or country, and ZIP + 4

WASHINGTON, DC 20001

F Name and address of principal officer

LINDA LIPSEN

777 6TH STREET NW

WASHINGTON,DC 20001

H(a) Is this a group return for affiliates?

☐ Yes ☒ No

H(b) Are all affiliates included?

☐ Yes ☐ No

If "No," attach a list (see instructions)

H(c) Group exemption number

I Tax-exempt status

☐ 501(c)(3) ☒ 501(c) (6) ☐ (insert no) ☐ 4947(a)(1) or ☐ 527

J Website:

WWW JUSTICE ORG

K Form of organization

☒ Corporation ☐ Trust ☐ Association ☐ Other

L Year of formation

1977

M State of legal domicile

DC

| Part I | Summary | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| Activities & Governance | <div><div>1</div><div>Briefly describe the organization's mission or most significant activities</div><div>THE AMERICAN ASSOCIATION FOR JUSTICE PROMOTES JUSTICE AND FAIRNESS FOR INJURED PERSONS, SAFEGUARDS VICTIM'S RIGHTS, AND STRENGTHENS THE CIVIL JUSTICE SYSTEM THROUGH EDUCATION AND DISCLOSURE OF INFORMATION CRITICAL TO PUBLIC HEALTH AND SAFETY</div></div> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | <div><div>2</div><div>Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets</div></div> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | <table><tr><td>3</td><td>Number of voting members of the governing body (Part VI, line 1a)</td><td>3</td><td>195</td></tr><tr><td>4</td><td>Number of independent voting members of the governing body (Part VI, line 1b)</td><td>4</td><td>195</td></tr><tr><td>5</td><td>Total number of individuals employed in calendar year 2010 (Part V, line 2a)</td><td>5</td><td>113</td></tr><tr><td>6</td><td>Total number of volunteers (estimate if necessary)</td><td>6</td><td>500</td></tr><tr><td>7a</td><td>Total unrelated business revenue from Part VIII, column (C), line 12</td><td>7a</td><td>1,648,666</td></tr><tr><td>7b</td><td>Net unrelated business taxable income from Form 990-T, line 34</td><td>7b</td><td>41,865</td></tr></table> | 3 | Number of voting members of the governing body (Part VI, line 1a) | 3 | 195 | 4 | Number of independent voting members of the governing body (Part VI, line 1b) | 4 | 195 | 5 | Total number of individuals employed in calendar year 2010 (Part V, line 2a) | 5 | 113 | 6 | Total number of volunteers (estimate if necessary) | 6 | 500 | 7a | Total unrelated business revenue from Part VIII, column (C), line 12 | 7a | 1,648,666 | 7b | Net unrelated business taxable income from Form 990-T, line 34 | 7b | 41,865 | | | | | | | | |
| 3 | Number of voting members of the governing body (Part VI, line 1a) | 3 | 195 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 4 | Number of independent voting members of the governing body (Part VI, line 1b) | 4 | 195 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 5 | Total number of individuals employed in calendar year 2010 (Part V, line 2a) | 5 | 113 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 6 | Total number of volunteers (estimate if necessary) | 6 | 500 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 7a | Total unrelated business revenue from Part VIII, column (C), line 12 | 7a | 1,648,666 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 7b | Net unrelated business taxable income from Form 990-T, line 34 | 7b | 41,865 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Revenue | <table><tr><th></th><th>Prior Year</th><th>Current Year</th></tr><tr><td>8</td><td>Contributions and grants (Part VIII, line 1h)</td><td>7,268,522</td><td>1,476,730</td></tr><tr><td>9</td><td>Program service revenue (Part VIII, line 2g)</td><td>20,827,095</td><td>20,871,821</td></tr><tr><td>10</td><td>Investment income (Part VIII, column (A), lines 3, 4, and 7d)</td><td>43,515</td><td>1,890</td></tr><tr><td>11</td><td>Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)</td><td>2,046,045</td><td>3,129,200</td></tr><tr><td>12</td><td>Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)</td><td>30,185,177</td><td>25,479,641</td></tr></table> | | Prior Year | Current Year | 8 | Contributions and grants (Part VIII, line 1h) | 7,268,522 | 1,476,730 | 9 | Program service revenue (Part VIII, line 2g) | 20,827,095 | 20,871,821 | 10 | Investment income (Part VIII, column (A), lines 3, 4, and 7d) | 43,515 | 1,890 | 11 | Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) | 2,046,045 | 3,129,200 | 12 | Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) | 30,185,177 | 25,479,641 | | | | | | | | | |
| | Prior Year | Current Year | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| Expenses | <table><tr><td>13</td><td>Grants and similar amounts paid (Part IX, column (A), lines 1–3)</td><td>0</td><td>0</td></tr><tr><td>14</td><td>Benefits paid to or for members (Part IX, column (A), line 4)</td><td>0</td><td>0</td></tr><tr><td>15</td><td>Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)</td><td>9,022,352</td><td>7,925,779</td></tr><tr><td>16a</td><td>Professional fundraising fees (Part IX, column (A), line 11e)</td><td>0</td><td>0</td></tr><tr><td>b</td><td>Total fundraising expenses (Part IX, column (D), line 25) <input type="checkbox"/> 0</td><td></td><td></td></tr><tr><td>17</td><td>Other expenses (Part IX, column (A), lines 11a–11d, 11f–24f)</td><td>17,714,194</td><td>17,654,805</td></tr><tr><td>18</td><td>Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)</td><td>26,736,546</td><td>25,580,584</td></tr><tr><td>19</td><td>Revenue less expenses Subtract line 18 from line 12</td><td>3,448,631</td><td>-100,943</td></tr></table> | 13 | Grants and similar amounts paid (Part IX, column (A), lines 1–3) | 0 | 0 | 14 | Benefits paid to or for members (Part IX, column (A), line 4) | 0 | 0 | 15 | Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10) | 9,022,352 | 7,925,779 | 16a | Professional fundraising fees (Part IX, column (A), line 11e) | 0 | 0 | b | Total fundraising expenses (Part IX, column (D), line 25) <input type="checkbox"/> 0 | | | 17 | Other expenses (Part IX, column (A), lines 11a–11d, 11f–24f) | 17,714,194 | 17,654,805 | 18 | Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25) | 26,736,546 | 25,580,584 | 19 | Revenue less expenses Subtract line 18 from line 12 | 3,448,631 | -100,943 |
| 13 | Grants and similar amounts paid (Part IX, column (A), lines 1–3) | 0 | 0 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 14 | Benefits paid to or for members (Part IX, column (A), line 4) | 0 | 0 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 15 | Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10) | 9,022,352 | 7,925,779 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 16a | Professional fundraising fees (Part IX, column (A), line 11e) | 0 | 0 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| b | Total fundraising expenses (Part IX, column (D), line 25) <input type="checkbox"/> 0 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 17 | Other expenses (Part IX, column (A), lines 11a–11d, 11f–24f) | 17,714,194 | 17,654,805 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| 19 | Revenue less expenses Subtract line 18 from line 12 | 3,448,631 | -100,943 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Net Assets or Fund Balances | <table><tr><th></th><th>Beginning of Current Year</th><th>End of Year</th></tr><tr><td>20</td><td>Total assets (Part X, line 16)</td><td>16,161,541</td><td>14,679,503</td></tr><tr><td>21</td><td>Total liabilities (Part X, line 26)</td><td>20,591,238</td><td>19,274,468</td></tr><tr><td>22</td><td>Net assets or fund balances Subtract line 21 from line 20</td><td>-4,429,697</td><td>-4,594,965</td></tr></table> | | Beginning of Current Year | End of Year | 20 | Total assets (Part X, line 16) | 16,161,541 | 14,679,503 | 21 | Total liabilities (Part X, line 26) | 20,591,238 | 19,274,468 | 22 | Net assets or fund balances Subtract line 21 from line 20 | -4,429,697 | -4,594,965 | | | | | | | | | | | | | | | | | |
| | Beginning of Current Year | End of Year | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 20 | Total assets (Part X, line 16) | 16,161,541 | 14,679,503 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 21 | Total liabilities (Part X, line 26) | 20,591,238 | 19,274,468 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 22 | Net assets or fund balances Subtract line 21 from line 20 | -4,429,697 | -4,594,965 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

Part II

Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here

Signature of officer

CHARLES JEFFRESS COO

Type or print name and title

2012-06-15

Date

Paid Preparer Use Only

Print/Type preparer's name

DEBORAH G KOSNETT

Preparer's signature

DEBORAH G KOSNETT

Date

Check if self-employed ☐

PTIN

Firm's name

TATE AND TRYON

Firm's EIN

Firm's address

2021 L STREET NW SUITE 400

WASHINGTON, DC 20036

Phone no

(202) 293-2200

May the IRS discuss this return with the preparer shown above? (see instructions)

☒ Yes ☐ No

For Paperwork Reduction Act Notice, see the separate instructions.

Cat No 11282Y

Form 990 (2010)

Part III

Statement of Program Service Accomplishments

Check if Schedule O contains a response to any question in this Part III

☐

☒

1

Briefly describe the organization's mission

THE MISSION OF THE ASSOCIATION SHALL BE TO SEEK JUSTICE FOR ALL PRESERVE THE CONSTITUTIONAL RIGHT TO TRIAL BY JURY PREVENT INJURY FROM OCCURRING CHAMPION THE CAUSE OF THOSE WHO DESERVE REDRESS FOR INJURY TO PERSON OR PROPERTY PROMOTE THE PUBLIC GOOD THROUGH CONCERTED EFFORTS TO SECURE SAFE PRODUCTS, A SAFE WORKPLACE, A CLEAN ENVIRONMENT, AND QUALITY HEALTH CARE FURTHER THE RULE OF LAW AND THE CIVIL JUSTICE SYSTEM, AND PROTECT THE RIGHTS OF THE ACCUSED INSPIRE EXCELLENCE IN ADVOCACY THROUGH TRAINING AND EDUCATION ENCOURAGE COOPERATION AMONG MEMBERS ADVANCE THE COMMON LAW AND THE FINEST TRADITIONS OF JURISPRUDENCE UPHOLD THE HONOR AND DIGNITY OF THE LEGAL PROFESSION AND THE HIGHEST STANDARDS OF ETHICAL CONDUCT AND INTEGRITY

2

Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?

☐ Yes ☒ No

If "Yes," describe these new services on Schedule O

3

Did the organization cease conducting, or make significant changes in how it conducts, any program services?

☐ Yes ☒ No

If "Yes," describe these changes on Schedule O

4

Describe the exempt purpose achievements for each of the organization's three largest program services by expenses

Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

4a

(Code) (Expenses \$ including grants of \$) (Revenue \$)

PUBLIC AFFAIRS - MONITORING STATE AND FEDERAL LEGISLATIVE AND REGULATORY ACTIVITIES AFFECTING THE TRIAL LAW PROFESSION

4b

(Code) (Expenses \$ including grants of \$) (Revenue \$)

MEMBERSHIP SERVICES - OFFERED TO FURTHER THE MISSION OF THE AMERICAN ASSOCIATION FOR JUSTICE, INCLUDE THE FOLLOWING --CONVENTIONS- INFORMATION EXCHANGE THROUGH MEETINGS AND EDUCATION HELD TWICE A YEAR FOR MEMBERS, MORE THAN 2,000 LAWYERS ATTEND CONVENTIONS --LEGAL RESEARCH-GATHERING CASE MATERIALS AND DECISIONS, VERDICTS AND SETTLEMENTS, AND STATE AND FEDERAL LEGISLATIVE AND REGULATORY ACTIVITIES AFFECTING THE TRIAL LAW PROFESSION AND SHARING MATERIALS AND KNOWLEDGE AMONG MEMBERS --MEMBER GROUPS-INFORMATION EXCHANGE AND SHARING KNOWLEDGE ABOUT THE TRIAL LAW PROFESSION THROUGH SEVERAL CAUCUSES AND A DIVISION, AND 18 SECTIONS AND MORE THAN 100 LITIGATION GROUPS --PUBLICATIONS--TRIAL MAGAZINE-PROVIDES TIMELY, RELEVANT, AND PRACTICAL LEGAL PRACTICE NEWS AND INFORMATION THAT OUR MEMBERS CAN APPLY IN THEIR TRIAL LAW PRACTICE, RECEIVED BY ALL MEMBERS AS WELL AS SOME JUDGES AND LAW LIBRARIES AND PUBLISHED IN PRINT MONTHLY, ONLINE EDITION IS AVAILABLE TO AAJ MEMBERS ONLY -TRIAL NEWS-THE MAGAZINE'S TWICE-MONTHLY E-NEWSLETTER GOES TO ALL AAJ MEMBERS TWICE A MONTH, WITH UPDATES ON NEWS AND TRENDS

4c

(Code) (Expenses \$ including grants of \$) (Revenue \$)

COMMUNICATIONS - RESPONDS TO OUTSIDE MEDIA REQUESTS AND ATTACKS BY OUR OPPOSITION, PROACTIVELY PITCHES STORIES AND DEVELOPS RELATIONSHIPS WITH NATIONAL REPORTERS, PRODUCES ORIGINAL RESEARCH REPORTS, PUBLICIZES CASES FOR AAJ MEMBERS, AND ASSISTS STATES WITH COMMUNICATION EFFORTS

4d

Other program services (Describe in Schedule O)

















(Expenses \$ including grants of \$) (Revenue \$)

4e

Total program service expenses \$

Part IV

Checklist of Required Schedules

| | Yes | No |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|-----|
| 1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A | 1 | No |
| 2 Is the organization required to complete Schedule B, Schedule of Contributors (see instruction)?  | 2 | Yes |
| 3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I  | 3 | Yes |
| 4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II | 4 | |
| 5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III  | 5 | Yes |
| 6 Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I  | 6 | No |
| 7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," complete Schedule D, Part II  | 7 | No |
| 8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III  | 8 | No |
| 9 Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV  | 9 | No |
| 10 Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V  | 10 | No |
| 11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable | | |
| a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI.  | 11a | Yes |
| b Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.  | 11b | No |
| c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.  | 11c | No |
| d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.  | 11d | Yes |
| e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.  | 11e | Yes |
| f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.  | 11f | Yes |
| 12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII  | 12a | No |
| b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional  | 12b | Yes |
| 13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E | 13 | No |
| 14a Did the organization maintain an office, employees, or agents outside of the United States? | 14a | No |
| b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If "Yes," complete Schedule F, Parts I and IV | 14b | No |
| 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the U S ? If "Yes," complete Schedule F, Parts II and IV | 15 | No |
| 16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the U S ? If "Yes," complete Schedule F, Parts III and IV | 16 | No |
| 17 Did the organization report a total of more than \$15,000, of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions) | 17 | No |
| 18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II | 18 | No |
| 19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III | 19 | No |
| 20a Did the organization operate one or more hospitals? If "Yes," complete Schedule H | 20a | No |
| b If "Yes" to line 20a, did the organization attach its audited financial statement to this return? Note. Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions) | 20b | |

Part IV

Checklist of Required Schedules (continued)

| | | | | |
|-----|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|-----|----|
| 21 | Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i> | 21 | | No |
| 22 | Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i> | 22 | | No |
| 23 | Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i> | 23 | Yes | |
| 24a | Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b-24d and complete Schedule K. If "No," go to line 25</i> | 24a | | No |
| b | Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? | 24b | | |
| c | Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? | 24c | | |
| d | Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? | 24d | | |
| 25a | Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i> | 25a | | |
| b | Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i> | 25b | | |
| 26 | Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? <i>If "Yes," complete Schedule L, Part II</i> | 26 | | No |
| 27 | Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? <i>If "Yes," complete Schedule L, Part III</i> | 27 | | No |
| 28 | Was the organization a party to a business transaction with one of the following parties? (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions) | | | |
| a | A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i> | 28a | | No |
| b | A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i> | 28b | | No |
| c | An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i> | 28c | | No |
| 29 | Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> | 29 | | No |
| 30 | Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i> | 30 | | No |
| 31 | Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i> | 31 | | No |
| 32 | Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i> | 32 | | No |
| 33 | Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i> | 33 | Yes | |
| 34 | Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1</i> | 34 | Yes | |
| 35 | Is any related organization a controlled entity within the meaning of section 512(b)(13)? | 35 | Yes | |
| a | Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | | | |
| 36 | Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i> | 36 | | |
| 37 | Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i> | 37 | | No |
| 38 | Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O | 38 | Yes | |

| | | | | |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|-----|----|
| <div>Part V</div> <div>Statements Regarding Other IRS Filings and Tax Compliance</div> <div>Check if Schedule O contains a response to any question in this Part V</div> | | | | |
| | | | Yes | No |
| 1a | Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable. | 1a | 54 | |
| b | Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable. | 1b | 0 | |
| c | Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? | 1c | Yes | |
| 2a | Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements filed for the calendar year ending with or within the year covered by this return. | 2a | 113 | |
| b | If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions). | 2b | Yes | |
| 3a | Did the organization have unrelated business gross income of \$1,000 or more during the year? | 3a | Yes | |
| b | If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O. | 3b | Yes | |
| 4a | At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? | 4a | | No |
| b | If "Yes," enter the name of the foreign country: _____ See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. | | | |
| 5a | Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? | 5a | | No |
| b | Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? | 5b | | No |
| c | If "Yes" to line 5a or 5b, did the organization file Form 8886-T? | 5c | | |
| 6a | Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible? | 6a | Yes | |
| b | If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? | 6b | Yes | |
| 7 Organizations that may receive deductible contributions under section 170(c). | | | | |
| a | Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? | 7a | | |
| b | If "Yes," did the organization notify the donor of the value of the goods or services provided? | 7b | | |
| c | Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? | 7c | | |
| d | If "Yes," indicate the number of Forms 8282 filed during the year. | 7d | | |
| e | Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? | 7e | | |
| f | Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? | 7f | | |
| g | If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? | 7g | | |
| h | If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? | 7h | | |
| 8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year? | | | | |
| 8 | | | | |
| 9 Sponsoring organizations maintaining donor advised funds. | | | | |
| a | Did the organization make any taxable distributions under section 4966? | 9a | | |
| b | Did the organization make a distribution to a donor, donor advisor, or related person? | 9b | | |
| 10 Section 501(c)(7) organizations. Enter | | | | |
| a | Initiation fees and capital contributions included on Part VIII, line 12. | 10a | | |
| b | Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities. | 10b | | |
| 11 Section 501(c)(12) organizations. Enter | | | | |
| a | Gross income from members or shareholders. | 11a | | |
| b | Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them). | 11b | | |
| 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? | | | | |
| b | If "Yes," enter the amount of tax-exempt interest received or accrued during the year. | 12b | | |
| 13 Section 501(c)(29) qualified nonprofit health insurance issuers. | | | | |
| a | Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O. | 13a | | |
| b | Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans. | 13b | | |
| c | Enter the amount of reserves on hand. | 13c | | |
| 14a Did the organization receive any payments for indoor tanning services during the tax year? | | | | |
| 14a | | | | |
| b | If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O. | 14b | | No |

Part VI

Governance, Management, and Disclosure

For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.
Check if Schedule O contains a response to any question in this Part VI

Section A. Governing Body and Management

| | | | |
|----|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|----|
| | | Yes | No |
| 1a | Enter the number of voting members of the governing body at the end of the tax year | | |
| 1b | Enter the number of voting members included in line 1a, above, who are independent | | |
| 2 | Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? | Yes | |
| 3 | Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? | | No |
| 4 | Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? | | No |
| 5 | Did the organization become aware during the year of a significant diversion of the organization's assets? | Yes | |
| 6 | Does the organization have members or stockholders? | Yes | |
| 7a | Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body? | Yes | |
| 7b | Are any decisions of the governing body subject to approval by members, stockholders, or other persons? | Yes | |
| 8 | Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following | | |
| 8a | The governing body? | Yes | |
| 8b | Each committee with authority to act on behalf of the governing body? | Yes | |
| 9 | Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O | | No |

Section B. Policies

(This Section B requests information about policies not required by the Internal Revenue Code.)

| | | | |
|-----|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|----|
| | | Yes | No |
| 10a | Does the organization have local chapters, branches, or affiliates? | Yes | |
| 10b | If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization? | | No |
| 11a | Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form? | | No |
| 11b | Describe in Schedule O the process, if any, used by the organization to review this Form 990 | | |
| 12a | Does the organization have a written conflict of interest policy? If "No," go to line 13 | Yes | |
| 12b | Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts? | Yes | |
| 12c | Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done | Yes | |
| 13 | Does the organization have a written whistleblower policy? | Yes | |
| 14 | Does the organization have a written document retention and destruction policy? | Yes | |
| 15 | Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? | | |
| 15a | The organization's CEO, Executive Director, or top management official | Yes | |
| 15b | Other officers or key employees of the organization | | No |
| 15c | If "Yes" to line 15a or 15b, describe the process in Schedule O (See instructions) | | |
| 16a | Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? | | No |
| 16b | If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements? | | |

Section C. Disclosure

| | |
|----|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 17 | List the States with which a copy of this Form 990 is required to be filed |
| 18 | Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you make these available. Check all that apply. <input type="checkbox"/> Own website <input type="checkbox"/> Another's website <input checked="" type="checkbox"/> Upon request |
| 19 | Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public. See Additional Data Table. |
| 20 | State the name, physical address, and telephone number of the person who possesses the books and records of the organization. MARY K BERGE 777 6TH STREET NW WASHINGTON, DC 20001 (202) 965-3510 |

Check if Schedule O contains a response to any question in this Part VII ☐ ☒

☐ Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee

Form **990** (2010)

Part VII

| | | |
|---|-----------------------------------------------------------------------------------------------------------------------------------------------------------------|----|
| 2 | Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization | 10 |
|---|-----------------------------------------------------------------------------------------------------------------------------------------------------------------|----|

| | |
|----------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 3 | Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i> |
| 4 | For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i> |
| 5 | Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i> |

Section B. Independent Contractors

| 1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization | | |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------|---------------------|
| (A) Name and business address | (B) Description of services | (C) Compensation |
| PATTON BOGGS 2550 M ST NW WASHINGTON, DC 20037 | LEGAL SERVICES | 495,250 |
| FORCEY & STINSON PLLC 818 CONNECTICUT AVE NW WASHINGTON, DC 20006 | LEGISLATIVE CONSULTANT | 183,811 |
| ANDREW COCHRAN 7068 SOLOMON SEAL COURT SPRINGFIELD, VA 22152 | LEGISLATIVE CONSULTANT | 180,000 |
| MARK FABIANI LLC 939 COAST BOULEVARD SUITE 4D LA JOLLA, CA 92037 | MEDIA STRATEGY | 162,500 |
| WASHINGTON TAX GROUP 300 NEW JERSEY AVE NW STE 601 WASHINGTON, DC 20001 | CONSULTANTS | 132,000 |
| 2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization 9 | | |

Part VIII

Statement of Revenue

| | | | (A) Total revenue | (B) Related or exempt function revenue | (C) Unrelated business revenue | (D) Revenue excluded from tax under sections 512, 513, or 514 | |
|-----------------------------------------------------------|--------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------|-------------------------------------------------------|-----------------------------------------|----------------------------------------------------------------------------------------------|---------|
| Contributions, gifts, grants and other similar amounts | 1a | Federated campaigns | 1a | | | | |
| | b | Membership dues | 1b | | | | |
| | c | Fundraising events | 1c | | | | |
| | d | Related organizations | 1d | | | | |
| | e | Government grants (contributions) | 1e | | | | |
| | f | All other contributions, gifts, grants, and similar amounts not included above | 1f | 1,476,730 | | | |
| | g | Noncash contributions included in lines 1a-1f \$ | | | | | |
| | h | Total. Add lines 1a-1f | | 1,476,730 | | | |
| | Program Service Revenue | 2a | Business Code | | | | |
| MEMBERSHIP DUES | | 900099 | 16,692,461 | 16,692,461 | | | |
| b | | REGISTRATION | 900099 | 3,115,289 | 3,115,289 | | |
| c | | ADVERTISING | 511120 | 953,753 | | 953,753 | |
| d | | SUBSCRIPTION | 900099 | 110,318 | 110,318 | | |
| e | | | | | | | |
| f | | All other program service revenue | | | | | |
| g | | Total. Add lines 2a-2f | | 20,871,821 | | | |
| Other Revenue | | 3 | Investment income (including dividends, interest and other similar amounts) | | | | |
| | | | 1,890 | | | 1,890 | |
| | 4 | Income from investment of tax-exempt bond proceeds . . | | | | | |
| | 5 | Royalties | | 557,368 | | | 557,368 |
| | 6a | (i) Real | | | | | |
| | | 383,410 | | | | | |
| | | (ii) Personal | | | | | |
| | | | | | | | |
| | b | Less rental expenses | | | | | |
| | c | Rental income or (loss) | | 383,410 | | | |
| | d | Net rental income or (loss) | | 383,410 | | | 383,410 |
| | 7a | (i) Securities | | | | | |
| | | | | | | | |
| | | (ii) Other | | | | | |
| | | | | | | | |
| | b | Less cost or other basis and sales expenses | | | | | |
| | c | Gain or (loss) | | | | | |
| | d | Net gain or (loss) | | | | | |
| | 8a | Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c) See Part IV, line 18 | | | | | |
| | | a | | | | | |
| | | | | | | | |
| | b | Less direct expenses | | b | | | |
| | c | Net income or (loss) from fundraising events . . | | | | | |
| 9a | Gross income from gaming activities See Part IV, line 19 . . | | | | | | |
| | a | | | | | | |
| | | | | | | | |
| b | Less direct expenses | | b | | | | |
| c | Net income or (loss) from gaming activities . . | | | | | | |
| 10a | Gross sales of inventory, less returns and allowances . . | | | | | | |
| | a | | | | | | |
| | | | | | | | |
| b | Less cost of goods sold | | b | | | | |
| c | Net income or (loss) from sales of inventory . . | | | | | | |
| Miscellaneous Revenue | | | Business Code | | | | |
| 11a | LEGAL CASE | | 900099 | 887,500 | 887,500 | | |
| | b OTHER INCOME | | 900099 | 690,471 | 566,070 | 124,401 | |
| | c LEGAL AND RESEARCH | | 511120 | 570,512 | | 570,512 | |
| | d All other revenue | | | 39,939 | 39,939 | | |
| e | Total. Add lines 11a-11d | | | 2,188,422 | | | |
| 12 | Total revenue. See Instructions | | | 25,479,641 | 21,411,577 | 1,648,666 | 942,668 |

Part IX

Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

| Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII. | | (A) Total expenses | (B) Program service expenses | (C) Management and general expenses | (D) Fundraising expenses |
|--------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------|---------------------------------|----------------------------------------|-----------------------------|
| 1 | Grants and other assistance to governments and organizations in the U S See Part IV, line 21 | | | | |
| 2 | Grants and other assistance to individuals in the U S See Part IV, line 22 | | | | |
| 3 | Grants and other assistance to governments, organizations, and individuals outside the U S See Part IV, lines 15 and 16 | | | | |
| 4 | Benefits paid to or for members | | | | |
| 5 | Compensation of current officers, directors, trustees, and key employees | 1,229,291 | | | |
| 6 | Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) | | | | |
| 7 | Other salaries and wages | 5,146,601 | | | |
| 8 | Pension plan contributions (include section 401(k) and section 403(b) employer contributions) | 37,002 | | | |
| 9 | Other employee benefits | 1,512,885 | | | |
| 10 | Payroll taxes | | | | |
| a | Fees for services (non-employees) | | | | |
| | Management | | | | |
| b | Legal | 540,928 | | | |
| c | Accounting | 101,814 | | | |
| d | Lobbying | 1,167,602 | | | |
| e | Professional fundraising services See Part IV, line 17 | | | | |
| f | Investment management fees | | | | |
| g | Other | 2,553,626 | | | |
| 12 | Advertising and promotion | 1,429,677 | | | |
| 13 | Office expenses | 45,864 | | | |
| 14 | Information technology | 1,755,092 | | | |
| 15 | Royalties | | | | |
| 16 | Occupancy | 3,119,583 | | | |
| 17 | Travel | 316,763 | | | |
| 18 | Payments of travel or entertainment expenses for any federal, state, or local public officials | | | | |
| 19 | Conferences, conventions, and meetings | 2,830,604 | | | |
| 20 | Interest | 27,596 | | | |
| 21 | Payments to affiliates | | | | |
| 22 | Depreciation, depletion, and amortization | 1,425,900 | | | |
| 23 | Insurance | 122,145 | | | |
| 24 | Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O) | | | | |
| a | PRINTING & PUBLICATIONS | 848,376 | | | |
| b | CREDIT CARD FEES | 365,137 | | | |
| c | POSTAGE & SHIPPING | 341,589 | | | |
| d | TELEPHONE | 340,346 | | | |
| e | FUNDRAISING | 313,269 | | | |
| f | All other expenses | 8,894 | | | |
| 25 | Total functional expenses. Add lines 1 through 24f | 25,580,584 | | | |
| 26 | Joint costs. Check here <input checked="" type="checkbox"/> if following SOP 98-2 (ASC 958-720) Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation | | | | |

Part X

Balance Sheet

| | | | | | (A) | | (B) |
|-----------------------------|-------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|------------|-------------------|------------|-------------|
| | | | | | Beginning of year | | End of year |
| Assets | 1 | Cash—non-interest-bearing | | | | 1 | |
| | 2 | Savings and temporary cash investments | | | 914,751 | 2 | 1,414,181 |
| | 3 | Pledges and grants receivable, net | | | 33,500 | 3 | 30,500 |
| | 4 | Accounts receivable, net | | | 576,683 | 4 | 620,427 |
| | 5 | Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L | | | | 5 | |
| | 6 | Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers, and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Schedule L | | | | 6 | |
| | 7 | Notes and loans receivable, net | | | | 7 | |
| | 8 | Inventories for sale or use | | | | 8 | |
| | 9 | Prepaid expenses and deferred charges | | | 371,078 | 9 | 169,350 |
| | 10a | Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D. | 10a | 12,755,673 | | | |
| | b | Less: accumulated depreciation | 10b | 6,264,513 | 7,653,428 | 10c | 6,491,160 |
| | 11 | Investments—publicly traded securities | | | 365,910 | 11 | 0 |
| | 12 | Investments—other securities. See Part IV, line 11 | | | | 12 | |
| | 13 | Investments—program-related. See Part IV, line 11 | | | | 13 | |
| | 14 | Intangible assets | | | | 14 | |
| | 15 | Other assets. See Part IV, line 11 | | | 6,246,191 | 15 | 5,953,885 |
| 16 | Total assets. Add lines 1 through 15 (must equal line 34) | | | 16,161,541 | 16 | 14,679,503 | |
| Liabilities | 17 | Accounts payable and accrued expenses | | | 1,906,841 | 17 | 2,286,439 |
| | 18 | Grants payable | | | | 18 | |
| | 19 | Deferred revenue | | | 7,224,047 | 19 | 6,804,049 |
| | 20 | Tax-exempt bond liabilities | | | | 20 | |
| | 21 | Escrow or custodial account liability. Complete Part IV of Schedule D | | | | 21 | |
| | 22 | Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L | | | | 22 | |
| | 23 | Secured mortgages and notes payable to unrelated third parties | | | | 23 | |
| | 24 | Unsecured notes and loans payable to unrelated third parties | | | | 24 | |
| | 25 | Other liabilities. Complete Part X of Schedule D | | | 11,460,350 | 25 | 10,183,980 |
| | 26 | Total liabilities. Add lines 17 through 25 | | | 20,591,238 | 26 | 19,274,468 |
| Net Assets or Fund Balances | Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34. | | | | | | |
| | 27 | Unrestricted net assets | | | -5,144,417 | 27 | -5,214,150 |
| | 28 | Temporarily restricted net assets | | | 714,720 | 28 | 619,185 |
| | 29 | Permanently restricted net assets | | | | 29 | |
| | Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34. | | | | | | |
| | 30 | Capital stock or trust principal, or current funds | | | | 30 | |
| | 31 | Paid-in or capital surplus, or land, building or equipment fund | | | | 31 | |
| | 32 | Retained earnings, endowment, accumulated income, or other funds | | | | 32 | |
| | 33 | Total net assets or fund balances | | | -4,429,697 | 33 | -4,594,965 |
| 34 | Total liabilities and net assets/fund balances | | | 16,161,541 | 34 | 14,679,503 | |

Part XI Reconciliation of Net Assets

Check if Schedule O contains a response to any question in this Part XI

| | | | |
|---|---------------------------------------------------------------------------------------------------------------|---|------------|
| 1 | Total revenue (must equal Part VIII, column (A), line 12) | 1 | 25,479,641 |
| 2 | Total expenses (must equal Part IX, column (A), line 25) | 2 | 25,580,584 |
| 3 | Revenue less expenses Subtract line 2 from line 1 | 3 | -100,943 |
| 4 | Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) | 4 | -4,429,697 |
| 5 | Other changes in net assets or fund balances (explain in Schedule O) | 5 | -64,325 |
| 6 | Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B)) | 6 | -4,594,965 |

Part XII Financial Statements and Reporting

Check if Schedule O contains a response to any question in this Part XII

| | | Yes | No |
|----|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|----|
| 1 | Accounting method used to prepare the Form 990 <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O | | |
| 2a | Were the organization's financial statements compiled or reviewed by an independent accountant? | | No |
| b | Were the organization's financial statements audited by an independent accountant? | Yes | |
| c | If "Yes," to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O | Yes | |
| d | If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a separate basis, consolidated basis, or both <input type="checkbox"/> Separate basis <input checked="" type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separated basis | | |
| 3a | As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? | | No |
| b | If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits | | |

SCHEDULE C
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

▶ Complete if the organization is described below.
▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No 1545-0047

2010

Open to Public Inspection

If the organization answered “Yes,” to Form 990, Part IV, Line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C
- Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B
- Section 527 organizations Complete Part I-A only

If the organization answered “Yes,” to Form 990, Part IV, Line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A

If the organization answered “Yes,” to Form 990, Part IV, Line 5 (Proxy Tax) or Form 990-EZ, Part V, line 35a (Proxy Tax), then

- Section 501(c)(4), (5), or (6) organizations Complete Part III

| | |
|--------------------------------------------------------------|--------------------------------------------------|
| Name of the organization AMERICAN ASSOCIATION FOR JUSTICE | Employer identification number 04-2114561 |
|--------------------------------------------------------------|--------------------------------------------------|

Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

| | | |
|---|----------------------------------------------------------------------------------------------------------|------|
| 1 | Provide a description of the organization’s direct and indirect political campaign activities in Part IV | |
| 2 | Political expenditures | ▶ \$ |
| 3 | Volunteer hours | |

Part I-B Complete if the organization is exempt under section 501(c)(3).

| | | |
|----|-----------------------------------------------------------------------------------------|----------------------------------------------------------|
| 1 | Enter the amount of any excise tax incurred by the organization under section 4955 | ▶ \$ |
| 2 | Enter the amount of any excise tax incurred by organization managers under section 4955 | ▶ \$ |
| 3 | If the organization incurred a section 4955 tax, did it file Form 4720 for this year? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 4a | Was a correction made? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| b | If “Yes,” describe in Part IV | |

Part I-C Complete if the organization is exempt under section 501(c) except section 501(c)(3).

| | | |
|---|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------|
| 1 | Enter the amount directly expended by the filing organization for section 527 exempt function activities | ▶ \$ |
| 2 | Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt funtion activities | ▶ \$ |
| 3 | Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b | ▶ \$ |
| 4 | Did the filing organization file Form 1120-POL for this year? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 5 | Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments For each organization listed, enter the amount paid from the filing organization’s funds Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV | |

| (a) Name | (b) Address | (c) EIN | (d) Amount paid from filing organization's funds If none, enter -0- | (e) Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0- |
|------------------------------------------|--------------------------------------------------|------------|---------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------|
| (1) AMERICAN ASSOCIATION FOR JUSTICE PAC | 777 6TH STREET NW STE 200 WASHINGTON,DC 20001 | 52-6161471 | | 7,520,142 |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |

Part II-A

Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

A

Check

☐

if the filing organization belongs to an affiliated group

B

Check

☐

if the filing organization checked box A and "limited control" provisions apply

| Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.) | | (a) Filing Organization's Totals | (b) Affiliated Group Totals | | | | | | | | | | | | |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------|----------------------------------------------------------|------------------------------------|--------------------|------------------------------|-----------------------------------------|-------------------------------------------------|-------------------------------------------|---------------------------------------------------|--------------------------------------------|--------------------------------------------------|-------------------|-------------|--|--|
| 1a Total lobbying expenditures to influence public opinion (grass roots lobbying) | | | | | | | | | | | | | | | |
| b Total lobbying expenditures to influence a legislative body (direct lobbying) | | | | | | | | | | | | | | | |
| c Total lobbying expenditures (add lines 1a and 1b) | | | | | | | | | | | | | | | |
| d Other exempt purpose expenditures | | | | | | | | | | | | | | | |
| e Total exempt purpose expenditures (add lines 1c and 1d) | | | | | | | | | | | | | | | |
| f Lobbying nontaxable amount Enter the amount from the following table in both columns | | | | | | | | | | | | | | | |
| <table><thead><tr><th>If the amount on line 1e, column (a) or (b) is:</th><th>The lobbying nontaxable amount is:</th></tr></thead><tbody><tr><td>Not over \$500,000</td><td>20% of the amount on line 1e</td></tr><tr><td>Over \$500,000 but not over \$1,000,000</td><td>\$100,000 plus 15% of the excess over \$500,000</td></tr><tr><td>Over \$1,000,000 but not over \$1,500,000</td><td>\$175,000 plus 10% of the excess over \$1,000,000</td></tr><tr><td>Over \$1,500,000 but not over \$17,000,000</td><td>\$225,000 plus 5% of the excess over \$1,500,000</td></tr><tr><td>Over \$17,000,000</td><td>\$1,000,000</td></tr></tbody></table> | | If the amount on line 1e, column (a) or (b) is: | The lobbying nontaxable amount is: | Not over \$500,000 | 20% of the amount on line 1e | Over \$500,000 but not over \$1,000,000 | \$100,000 plus 15% of the excess over \$500,000 | Over \$1,000,000 but not over \$1,500,000 | \$175,000 plus 10% of the excess over \$1,000,000 | Over \$1,500,000 but not over \$17,000,000 | \$225,000 plus 5% of the excess over \$1,500,000 | Over \$17,000,000 | \$1,000,000 | | |
| If the amount on line 1e, column (a) or (b) is: | The lobbying nontaxable amount is: | | | | | | | | | | | | | | |
| Not over \$500,000 | 20% of the amount on line 1e | | | | | | | | | | | | | | |
| Over \$500,000 but not over \$1,000,000 | \$100,000 plus 15% of the excess over \$500,000 | | | | | | | | | | | | | | |
| Over \$1,000,000 but not over \$1,500,000 | \$175,000 plus 10% of the excess over \$1,000,000 | | | | | | | | | | | | | | |
| Over \$1,500,000 but not over \$17,000,000 | \$225,000 plus 5% of the excess over \$1,500,000 | | | | | | | | | | | | | | |
| Over \$17,000,000 | \$1,000,000 | | | | | | | | | | | | | | |
| g Grassroots nontaxable amount (enter 25% of line 1f) | | | | | | | | | | | | | | | |
| h Subtract line 1g from line 1a If zero or less, enter -0- | | | | | | | | | | | | | | | |
| i Subtract line 1f from line 1c If zero or less, enter -0- | | | | | | | | | | | | | | | |
| j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? | | <input type="checkbox"/> Yes <input type="checkbox"/> No | | | | | | | | | | | | | |

4-Year Averaging Period Under Section 501(h)
(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f on page 4.)

| Lobbying Expenditures During 4-Year Averaging Period | | | | | |
|--------------------------------------------------------------|----------|----------|----------|----------|-----------|
| Calendar year (or fiscal year beginning in) | (a) 2007 | (b) 2008 | (c) 2009 | (d) 2010 | (e) Total |
| 2a Lobbying non-taxable amount | | | | | |
| b Lobbying ceiling amount (150% of line 2a, column(e)) | | | | | |
| c Total lobbying expenditures | | | | | |
| d Grassroots non-taxable amount | | | | | |
| e Grassroots ceiling amount (150% of line 2d, column (e)) | | | | | |
| f Grassroots lobbying expenditures | | | | | |

Part II-B

Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

| | | (a) | | (b) |
|----|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|----|--------|
| | | Yes | No | Amount |
| 1 | During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of | | | |
| a | Volunteers? | | | |
| b | Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? | | | |
| c | Media advertisements? | | | |
| d | Mailings to members, legislators, or the public? | | | |
| e | Publications, or published or broadcast statements? | | | |
| f | Grants to other organizations for lobbying purposes? | | | |
| g | Direct contact with legislators, their staffs, government officials, or a legislative body? | | | |
| h | Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? | | | |
| i | Other activities? If "Yes," describe in Part IV | | | |
| j | Total lines 1c through 1i | | | |
| 2a | Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? | | | |
| b | If "Yes," enter the amount of any tax incurred under section 4912 | | | |
| c | If "Yes," enter the amount of any tax incurred by organization managers under section 4912 | | | |
| d | If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? | | | |

Part III-A

Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

| | | Yes | No |
|---|--------------------------------------------------------------------------------------------------|-----|-----|
| 1 | Were substantially all (90% or more) dues received nondeductible by members? | 1 | No |
| 2 | Did the organization make only in-house lobbying expenditures of \$2,000 or less? | 2 | No |
| 3 | Did the organization agree to carryover lobbying and political expenditures from the prior year? | 3 | Yes |

Part III-B

Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, line 3 is answered "Yes".

| | | | |
|---|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----|------------|
| 1 | Dues, assessments and similar amounts from members | 1 | 16,692,461 |
| 2 | Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). | | |
| a | Current year | 2a | 3,271,812 |
| b | Carryover from last year | 2b | 2,284,329 |
| c | Total | 2c | 5,556,141 |
| 3 | Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues | 3 | 3,317,482 |
| 4 | If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year? | 4 | 2,238,659 |
| 5 | Taxable amount of lobbying and political expenditures (see instructions) | 5 | |

Part IV

Supplemental Information

Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, and Part II-B, line 1i. Also, complete this part for any additional information.

| Identifier | Return Reference | Explanation |
|-----------------------------------------------------------------|------------------|-------------------------------------------------------------------|
| ORGANIZATIONS DIRECT AND INDIRECT POLITICAL CAMPAIGN ACTIVITIES | PART I-A, LINE 1 | OPERATION OF IRC SECTION 527 CONNECTED POLITICAL ACTION COMMITTEE |

SCHEDULE D

(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

▶ **Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.**
▶ **Attach to Form 990. ▶ See separate instructions.**

OMB No 1545-0047

2010

Open to Public
Inspection

Name of the organization
AMERICAN ASSOCIATION FOR JUSTICE

Employer identification number

04-2114561

Part I

Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

| | | |
|---|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------|
| | (a) Donor advised funds | (b) Funds and other accounts |
| 1 | Total number at end of year | |
| 2 | Aggregate contributions to (during year) | |
| 3 | Aggregate grants from (during year) | |
| 4 | Aggregate value at end of year | |
| 5 | Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? | |
| | <div><input type="checkbox"/> Yes</div> <div><input type="checkbox"/> No</div> | |
| 6 | Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit | |
| | <div><input type="checkbox"/> Yes</div> <div><input type="checkbox"/> No</div> | |

Part II

Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

1

Purpose(s) of conservation easements held by the organization (check all that apply)

☐ Preservation of land for public use (e g , recreation or pleasure)

☐ Preservation of an historically importantly land area

☐ Protection of natural habitat

☐ Preservation of a certified historic structure

☐ Preservation of open space

2

Complete lines 2a–2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year

| | |
|----|-----------------------------|
| | Held at the End of the Year |
| 2a | |
| 2b | |
| 2c | |
| 2d | |

3

Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year ▶ _____

4

Number of states where property subject to conservation easement is located ▶ _____

5

Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?

☐ Yes

☐ No

6

Staff and volunteer hours devoted to monitoring, inspecting and enforcing conservation easements during the year ▶ _____

7

Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ \$ _____

8

Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)?

☐ Yes

☐ No

9

In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

Part III

Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

1a

If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items

b

If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items

(i)

Revenues included in Form 990, Part VIII, line 1

▶ \$ _____

(ii)

Assets included in Form 990, Part X

▶ \$ _____

2

If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items

a

Revenues included in Form 990, Part VIII, line 1

▶ \$ _____

b

Assets included in Form 990, Part X

▶ \$ _____

Part III

Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

3

Using the organization's accession and other records, check any of the following that are a significant use of its collection items (check all that apply)

a

☐ Public exhibition

b

☐ Scholarly research

c

☐ Preservation for future generations

d

☐ Loan or exchange programs

e

☐ Other

4

Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV

5

During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?

☐ Yes

☐ No

Part IV

Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a

Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?

☐ Yes

☐ No

b

If "Yes," explain the arrangement in Part XIV and complete the following table

| | |
|----|--------|
| | Amount |
| 1c | |
| 1d | |
| 1e | |
| 1f | |

2a

Did the organization include an amount on Form 990, Part X, line 21?

☐ Yes

☐ No

b

If "Yes," explain the arrangement in Part XIV

Part V

Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.

| | | | | | |
|----|----------------------------------------------------------|---------------|-------------------|---------------------|--------------------|
| | (a)Current Year | (b)Prior Year | (c)Two Years Back | (d)Three Years Back | (e)Four Years Back |
| 1a | Beginning of year balance | | | | |
| b | Contributions | | | | |
| c | Investment earnings or losses | | | | |
| d | Grants or scholarships | | | | |
| e | Other expenditures for facilities and programs | | | | |
| f | Administrative expenses | | | | |
| g | End of year balance | | | | |

2

Provide the estimated percentage of the year end balance held as

a

Board designated or quasi-endowment ▶

b

Permanent endowment ▶

c

Term endowment ▶

3a

Are there endowment funds not in the possession of the organization that are held and administered for the organization by

(i)

unrelated organizations

(ii)

related organizations

b

If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?

| | | |
|--------|-----|----|
| | Yes | No |
| 3a(i) | | |
| 3a(ii) | | |
| 3b | | |

4

Describe in Part XIV the intended uses of the organization's endowment funds

Part VI

Investments—Land, Buildings, and Equipment. See Form 990, Part X, line 10.

| Description of investment | (a) Cost or other basis (investment) | (b)Cost or other basis (other) | (c) Accumulated depreciation | (d) Book value |
|--------------------------------------------------------------------------------------------------------|--------------------------------------|--------------------------------|------------------------------|----------------|
| 1a Land | | | | |
| b Buildings | | | | |
| c Leasehold improvements | | 5,165,732 | 1,337,780 | 3,827,952 |
| d Equipment | | 2,472,163 | 1,201,983 | 1,270,180 |
| e Other | | 5,117,778 | 3,724,750 | 1,393,028 |
| Total. Add lines 1a-1e (Column (d) should equal Form 990, Part X, column (B), line 10(c).) ▶ | | | | 6,491,160 |

| Part XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements | | |
|--------------------------------------------------------------------------------------|---------------------------------------------------------------------------------|-------------|
| 1 | Total revenue (Form 990, Part VIII, column (A), line 12) | 125,479,641 |
| 2 | Total expenses (Form 990, Part IX, column (A), line 25) | 25,580,584 |
| 3 | Excess or (deficit) for the year Subtract line 2 from line 1 | -100,943 |
| 4 | Net unrealized gains (losses) on investments | |
| 5 | Donated services and use of facilities | |
| 6 | Investment expenses | |
| 7 | Prior period adjustments | -276,450 |
| 8 | Other (Describe in Part XIV) | 212,125 |
| 9 | Total adjustments (net) Add lines 4 - 8 | -64,325 |
| 10 | Excess or (deficit) for the year per financial statements Combine lines 3 and 9 | -165,268 |

| Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return | | |
|---------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------|-------------|
| 1 | Total revenue, gains, and other support per audited financial statements | 125,803,078 |
| 2 | Amounts included on line 1 but not on Form 990, Part VIII, line 12 | |
| a | Net unrealized gains on investments2a | |
| b | Donated services and use of facilities2b111,312 | |
| c | Recoveries of prior year grants2c | |
| d | Other (Describe in Part XIV)2d212,125 | |
| e | Add lines 2a through 2d2e323,437 | |
| 3 | Subtract line 2e from line 13 | 25,479,641 |
| 4 | Amounts included on Form 990, Part VIII, line 12, but not on line 1 | |
| a | Investment expenses not included on Form 990, Part VIII, line 7b4a | |
| b | Other (Describe in Part XIV)4b | |
| c | Add lines 4a and 4b4c0 | |
| 5 | Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)5 | 25,479,641 |

| Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return | | |
|------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------|-------------|
| 1 | Total expenses and losses per audited financial statements | 125,691,896 |
| 2 | Amounts included on line 1 but not on Form 990, Part IX, line 25 | |
| a | Donated services and use of facilities2a111,312 | |
| b | Prior year adjustments2b | |
| c | Other losses2c | |
| d | Other (Describe in Part XIV)2d | |
| e | Add lines 2a through 2d2e111,312 | |
| 3 | Subtract line 2e from line 13 | 25,580,584 |
| 4 | Amounts included on Form 990, Part IX, line 25, but not on line 1: | |
| a | Investment expenses not included on Form 990, Part VIII, line 7b4a | |
| b | Other (Describe in Part XIV)4b | |
| c | Add lines 4a and 4b4c0 | |
| 5 | Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)5 | 25,580,584 |

Part XIV Supplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information.

| Identifier | Return Reference | Explanation |
|-----------------------------------------------------|------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| DESCRIPTION OF UNCERTAIN TAX POSITIONS UNDER FIN 48 | PART X | THE ASSOCIATION BELIEVES THAT IT HAS APPROPRIATE SUPPORT FOR INCOME TAX POSITIONS TAKEN THEREFORE, MANAGEMENT HAS NOT IDENTIFIED ANY UNCERTAIN INCOME TAX POSITIONS. THE FISCAL YEARS ENDING JUNE 30, 2008 THROUGH 2011 REMAIN OPEN FOR EXAMINATION BY TAXING AUTHORITIES. |
| PART XI, LINE 8 - OTHER ADJUSTMENTS | | PENSION BENEFIT OTHER THAN PERIODIC 212,125 |
| PART XII, LINE 2D - OTHER ADJUSTMENTS | | PENSION BENEFIT OTHER THAN PERIODIC 212,125 |

| | | |
|----------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------|
| Schedule J (Form 990) <div>Department of the Treasury Internal Revenue Service</div> | <div>Compensation Information</div> <div>For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees</div> <div>▶ Complete if the organization answered "Yes" to Form 990, Part IV, question 23.</div> <div>▶ Attach to Form 990. ▶ See separate instructions.</div> | OMB No 1545-0047 |
| | | 2010 |
| | | Open to Public Inspection |

| | |
|--------------------------------------------------------------|--------------------------------------------------|
| Name of the organization AMERICAN ASSOCIATION FOR JUSTICE | Employer identification number 04-2114561 |
|--------------------------------------------------------------|--------------------------------------------------|

Part I

Questions Regarding Compensation

| | | | |
|----|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|-----|
| | | Yes | No |
| 1a | Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items | | |
| | <div><div><input checked="" type="checkbox"/> First-class or charter travel</div><div><input type="checkbox"/> Travel for companions</div><div><input type="checkbox"/> Tax idemnification and gross-up payments</div><div><input type="checkbox"/> Discretionary spending account</div></div> <div><div><input type="checkbox"/> Housing allowance or residence for personal use</div><div><input type="checkbox"/> Payments for business use of personal residence</div><div><input checked="" type="checkbox"/> Health or social club dues or initiation fees</div><div><input type="checkbox"/> Personal services (e g , maid, chauffeur, chef)</div></div> | | |
| b | If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all the expenses described above? If "No," complete Part III to explain | 1b | Yes |
| 2 | Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a? | 2 | Yes |
| 3 | Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director Check all that apply | | |
| | <div><div><input checked="" type="checkbox"/> Compensation committee</div><div><input checked="" type="checkbox"/> Independent compensation consultant</div><div><input checked="" type="checkbox"/> Form 990 of other organizations</div></div> <div><div><input checked="" type="checkbox"/> Written employment contract</div><div><input type="checkbox"/> Compensation survey or study</div><div><input checked="" type="checkbox"/> Approval by the board or compensation committee</div></div> | | |
| 4 | During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization | | |
| a | Receive a severance payment or change-of-control payment from the organization or a related organization? | 4a | Yes |
| b | Participate in, or receive payment from, a supplemental nonqualified retirement plan? | 4b | Yes |
| c | Participate in, or receive payment from, an equity-based compensation arrangement? | 4c | No |
| | If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III | | |
| | Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-9. | | |
| 5 | For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of | | |
| a | The organization? | 5a | |
| b | Any related organization? | 5b | |
| | If "Yes," to line 5a or 5b, describe in Part III | | |
| 6 | For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of | | |
| a | The organization? | 6a | |
| b | Any related organization? | 6b | |
| | If "Yes," to line 6a or 6b, describe in Part III | | |
| 7 | For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III | 7 | |
| 8 | Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regs section 53 4958-4(a)(3)? If "Yes," describe in Part III | 8 | |
| 9 | If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)? | 9 | |

Part II

Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions on row (ii) Do not list any individuals that are not listed on Form 990, Part VII

Note. The sum of columns (B)(i)-(iii) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a

| (A) Name | | (B) Breakdown of W-2 and/or 1099-MISC compensation | | | (C) Retirement and other deferred compensation | (D) Nontaxable benefits | (E) Total of columns (B)(i)-(D) | (F) Compensation reported in prior Form 990 or Form 990-EZ |
|-------------------------|------|----------------------------------------------------|-------------------------------------|-------------------------------------|------------------------------------------------|-------------------------|---------------------------------|------------------------------------------------------------|
| | | (i) Base compensation | (ii) Bonus & incentive compensation | (iii) Other reportable compensation | | | | |
| (1) MARY BERGE | (i) | 187,570 | 15,000 | 0 | 3,719 | 4,947 | 211,236 | 0 |
| | (ii) | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| (2) LINDA LIPSEN | (i) | 379,987 | 23,750 | 0 | 9,115 | 24,422 | 437,274 | 0 |
| | (ii) | 19,999 | 1,250 | 0 | 480 | 1,285 | 23,014 | 0 |
| (3) THOMAS HENDERSON | (i) | 199,500 | 14,250 | 0 | 0 | 0 | 213,750 | 0 |
| | (ii) | 10,500 | 750 | 0 | 0 | 0 | 11,250 | 0 |
| (4) ANJALI JESSERAMSING | (i) | 88,636 | 1,250 | 0 | 4,664 | 9,524 | 104,074 | 0 |
| | (ii) | 88,636 | 1,250 | 0 | 4,664 | 9,524 | 104,074 | 0 |
| (5) DANIEL COHEN | (i) | 204,610 | 0 | 0 | 9,890 | 12,617 | 227,117 | 0 |
| | (ii) | 10,769 | 0 | 0 | 521 | 664 | 11,954 | 0 |
| (6) SUSAN STEINMAN | (i) | 139,399 | 0 | 0 | 7,284 | 15,160 | 161,843 | 0 |
| | (ii) | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| (7) JON HABER | (i) | 483,725 | 0 | 0 | 0 | 0 | 483,725 | 0 |
| | (ii) | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| (8) | | | | | | | | |
| (9) | | | | | | | | |
| (10) | | | | | | | | |
| (11) | | | | | | | | |
| (12) | | | | | | | | |
| (13) | | | | | | | | |
| (14) | | | | | | | | |
| (15) | | | | | | | | |
| (16) | | | | | | | | |

Part III

Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8. Also complete this part for any additional information.

| Identifier | Return Reference | Explanation |
|--------------------------|--------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| | PART I, LINE 1A | LINDA LIPSEN WAS PROVIDED WITH A SOCIAL CLUB MEMBERSHIP. MS LIPSEN DID NOT RECEIVE ANY REIMBURSEMENT FOR SPOUSAL TRAVEL. ADDITIONALLY, MS LIPSEN WAS TEMPORARILY PROVIDED FIRST CLASS TRAVEL, FOLLOWING SURGERY. |
| | PART I, LINES 4A-B | COMPENSATION REPORTED FOR JON HABER REPRESENTS AMOUNTS DUE TO HIM UNDER A CONTRACTUAL AGREEMENT. THIS AMOUNT REPRESENTS THE FINAL AMOUNT DUE TO MR. HABER UNDER THE SEVERANCE AGREEMENT. LINDA LIPSEN AND DANIEL COHEN PARTICIPATE IN A 457F SUPPLEMENTAL RETIREMENT PROGRAM. TOTAL BENEFIT ACCRUAL UNDER THIS PLAN AS OF JULY 31, 2011 WAS \$165,649 FOR MS LIPSEN AND \$135,708 FOR MR. COHEN. |
| SUPPLEMENTAL INFORMATION | PART III | COMPENSATION REPORTED FOR THOMAS HENDERSON REPRESENTS AMOUNTS EARNED BY HIM DURING HIS TENURE AS THE INTERIM CEO FOR THE ASSOCIATION. |

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

**Complete to provide information for responses to specific questions on
Form 990 or to provide any additional information.**
▶ Attach to Form 990 or 990-EZ.

OMB No 1545-0047

2010

**Open to Public
Inspection**

| | |
|---------------------------------------------------------------------|-----------------------------------------------------|
| Name of the organization AMERICAN ASSOCIATION FOR JUSTICE | Employer identification number 04-2114561 |
|---------------------------------------------------------------------|-----------------------------------------------------|

| Identifier | Return Reference | Explanation |
|-----------------------------------------------|------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| FORM 990, PART VI, SECTION A, LINE 1 | | AAJ HAS AN EXECUTIVE COMMITTEE WITH THE AUTHORITY TO ACT FOR THE ORGANIZATION BETWEEN BOARD OF GOVERNORS MEETINGS, EXCEPT WITH REGARD TO THOSE MATTERS SPECIFICALLY RESERVED TO THE BOARD EXECUTIVE COMMITTEE ACTIONS ARE REPORTED TO THE BOARD AT THE NEXT BOARD MEETING THE EXECUTIVE COMMITTEE CONSISTS OF THE OFFICERS OF THE ASSOCIATION, TWO MEMBERS APPOINTED BY THE PRESIDENT (ONLY ONE OF WHOM MAY BE A PAST-PRESIDENT), FIVE MEMBERS OF THE BOARD OF GOVERNORS ELECTED BY THE BOARD OF GOVERNORS, THE CHAIR OF THE BUDGET COMMITTEE, THE CHAIR OF STATE DELEGATES, THE IMMEDIATE PAST PRESIDENT, A MEMBER OF THE NATIONAL ASSOCIATION OF TRIAL LAWYER EXECUTIVES (NATLE) SELECTED BY NATLE, THE CHAIR OF THE PRESIDENT'S COUNCIL, A MEMBER FROM THE WOMEN'S CAUCUS SELECTED BY THE WOMEN'S CAUCUS, A MEMBER FROM THE MINORITY CAUCUS SELECTED BY THE MINORITY CAUCUS, A MEMBER OF THE NEW LAWYERS DIVISION SELECTED BY THE NEW LAWYERS DIVISION, AND THE CEO OF THE ASSOCIATION (WITHOUT THE RIGHT TO VOTE) |

| Identifier | Return Reference | Explanation |
|--------------------------------------|------------------|--------------------------------------------------------------|
| FORM 990, PART VI, SECTION A, LINE 2 | | ELISE R SANGUINETTI AND PETER HINTON - BUSINESS RELATIONSHIP |

| Identifier | Return Reference | Explanation |
|-----------------------------------------------|------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| FORM 990, PART VI, SECTION A, LINE 5 | | SUBSEQUENT TO JULY 31, 2011, THE ASSOCIATION DETERMINED THAT AN EMPLOYEE HAD ENGAGED IN A PATTERN OF FRAUDULENT ACTIVITY AMOUNTING TO A TOTAL OF \$315,000 OF PERSONAL EXPENSES BEING PAID BY THE ASSOCIATION OVER THE PERIOD FROM SEPTEMBER 2009 THROUGH DECEMBER 2011 THE EMPLOYEE HAS BEEN TERMINATED THE ASSOCIATION HAS NOTIFIED LAW ENFORCEMENT AUTHORITIES OF THE FRAUD AND HAS FULLY COOPERATED WITH THEM DURING THEIR INVESTIGATION OF THIS ISSUE THE ASSOCIATION IS COVERED BY AN EMPLOYEE DISHONESTY INSURANCE POLICY AS SUCH, THE ASSOCIATION HAS SUBMITTED A CLAIM WITH ITS INSURANCE CARRIER IT IS CURRENTLY ANTICIPATED THAT THE MAJORITY OF THE LOSS WILL BE COVERED BY INSURANCE |

| Identifier | Return Reference | Explanation |
|-----------------------------------------------|------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| FORM 990, PART VI, SECTION A, LINE 6 | | THE ASSOCIATION HAS THE FOLLOWING CLASSES OF MEMBERS REGULAR MEMBER LICENSED TO PRACTICE LAW AND FOR THE MOST PART, BASED ON CASELOAD AND TIME, REPRESENTS THE PLAINTIFF IN CIVIL LITIGATION OR REPRESENTS THE DEFENDANT IN CRIMINAL LITIGATION ASSOCIATE MEMBER LICENSED TO PRACTICE LAW AND DOES NOT OTHERWISE QUALIFY FOR ANY OTHER MEMBERSHIP CLASS INTERNATIONAL MEMBER LICENSED TO PRACTICE LAW, AND RESIDES OUTSIDE THE U S OR CANADA (MAY JOIN AS A REGULAR OR ASSOCIATE MEMBER) GOVERNMENT MEMBER LICENSED TO PRACTICE LAW AND IS IN THE FULL-TIME EMPLOY OF ANY LOCAL, STATE, OR FEDERAL GOVERNMENT AGENCY OR PUBLIC DEFENDER LAW PROFESSOR MEMBER ENGAGED IN FULL-TIME TEACHING OF THE LAW AT ANY ACCREDITED LAW SCHOOL OR COLLEGE AND IS LICENSED TO PRACTICE LAW IN ANY COUNTRY, STATE, OR JURISDICTION MILITARY MEMBER LICENSED TO PRACTICE LAW IN ANY COUNTRY, STATE, OR JURISDICTION, AND IS IN THE FULL-TIME ACTIVE SERVICE OF THE ARMED FORCES OF THE UNITED STATES LAW STUDENT MEMBER A LAW STUDENT ENGAGED IN A COURSE OF STUDY AT A LAW SCHOOL LAW GRADUATE MEMBER HAS RECEIVED A DEGREE IN LAW FROM AN ACCREDITED LAW SCHOOL OR COLLEGE BUT HAS NOT BEEN LICENSED TO PRACTICE LAW PARALEGAL AFFILIATE MEMBER HAS MEMBERSHIP IN AN AFFILIATED UNIT OF AAJ COMPOSED OF PARALEGALS RETIRED MEMBERS-MEMBERS WHO HAVE ATTAINED THE AGE OF SEVENTY YEARS, WHO HAS RETIRED FROM THE ACTIVE PRACTICE OF LAW, AND WHO HAS COMPLETED TEN YEARS AS A DUES-PAYING MEMBERS OF THE ASSOCITATION IN ADDITION, ANY MEMBER ATTAINING 70 YEARS OF AGE AND 30 YEARS OF PAID AAJ MEMBERSHIP, REGARDLESS OF EMPLOYMENT STATUS, WILL BE ELIGIBLE FOR RETIRED STATUS EMERITUS MEMBERS-ANY PERSON WHO HAS ATTAINED THE AGE OF SIXTY YEARS, WHO HAS RETIRED FROM THE ACTIVE PRACTICE OF LAW, AND WHO HAS COMPLETED TEN YEARS AS A DUES-PAYING MEMBER OF THE ASSOCIATION WILL BE ELIGIBLE FOR EMERITUS MEMBERSHIP AND SHALL, PRIOR TO ATTAINING THE AGE OF SEVENTY YEARS, CONTINUE TO BE AN EMERITUS MEMBER |

| Identifier | Return Reference | Explanation |
|------------------------------------------------|------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| FORM 990, PART VI, SECTION A, LINE 7A | | MEMBERS OF THE BOARD OF GOVERNORS AND STATE DELEGATES ARE NOMINATED AND ELECTED BY AAJ MEMBERS AS PROVIDED FOR IN ITS BYLAWS OR RULES FOR ELECTION. NO MEMBER SHALL BE ELECTED WHOSE PRINCIPAL OFFICE IS LOCATED WITHIN A STATE WHERE AN OFFICIAL AFFILIATE OF THE ASSOCIATION IS LOCATED, IF SUCH AFFILIATE HAS NOMINATED ONE OR MORE MEMBERS, UNLESS SUCH MEMBER SHALL HAVE BEEN NOMINATED BY THAT OFFICIAL AFFILIATE. NO MEMBER OF THE BOARD OF GOVERNORS OR STATE DELEGATES SHALL BE ELECTED UNLESS SAID GOVERNOR OR DELEGATE IS AN ELIGIBLE MEMBER AS PROVIDED FOR IN THE AAJ BYLAWS. NO MEMBER SHALL BE ELIGIBLE TO VOTE ON ANY MATTER OR IN ANY ELECTION AT THE ANNUAL CONVENTION UNLESS SUCH MEMBER HAS BEEN A MEMBER OR HAS APPLIED FOR MEMBERSHIP AT LEAST SIXTY DAYS PRIOR TO THE ANNUAL CONVENTION AND IS A PAID REGISTRANT AT SUCH CONVENTION. |

| Identifier | Return Reference | Explanation |
|---------------------------------------|------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| FORM 990, PART VI, SECTION A, LINE 7B | | THE ESTABLISHMENT OF NEW AAJ SECTIONS, THE ABOLITION OF SECTIONS AND AMALGAMATION OF SECTIONS SHALL BE BY ACTION OF THE BOARD OF GOVERNORS WITH THE APPROVAL OF THE MEMBERSHIP AT THE ANNUAL CONVENTION |

| Identifier | Return Reference | Explanation |
|-------------------------------------------------|------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| FORM 990, PART VI, SECTION B, LINE 10B | | THE ASSOCIATION HAS STATE AFFILIATES BUT EACH IS AN INDEPENDENTLY INCORPORATED ENTITY , WITH ITS OWN BYLAWS AND ENTIRELY SEPARATE ARTICLES OF INCORPORATION. AN ATTORNEY DOES NOT NEED TO BE A MEMBER OF AAJ IN ORDER TO BE A MEMBER OF A STATE AFFILIATE. THE BOARD HAS DESIGNATED AFFILIATES PURSUANT TO ARTICLE XII OF THE BYLAWS, WHICH PROVIDES "ANY STATE OR LOCAL TRIAL LAWYERS ASSOCIATION MAY BECOME AN AFFILIATE OF THE ASSOCIATION UPON APPROVAL BY THE BOARD OF GOVERNORS, PROVIDED THAT ITS PURPOSES ARE CONSISTENT WITH THE PURPOSES OF THE ASSOCIATION, AND PROVIDED THE STATE OR LOCAL TRIAL LAWYERS ASSOCIATION DOES NOT SPONSOR A FEDERAL POLITICAL ACTION COMMITTEE. THE BOARD OF GOVERNORS SHALL BE ENTITLED TO REVIEW THE PROGRAMS, ACTIVITIES, AND POLICIES OF EACH AFFILIATE AND MAY , AFTER APPROPRIATE NOTICE TO THE AFFILIATE, RESCIND THE AFFILIATE STATUS ." OTHER THAN THIS BYLAWS PROVISION, THERE ARE NO OTHER WRITTEN POLICIES AND PROCEDURES GOVERNING AFFILIATE ACTIVITIES. |

| Identifier | Return Reference | Explanation |
|---------------------------------------|------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| FORM 990, PART VI, SECTION B, LINE 11 | | THE FORM 990 IS REVIEWED BY THE AAJ CHIEF FINANCIAL OFFICER AND AUDIT COMMITTEE, AND IS SIGNED BY THE AAJ COO THEREAFTER, A FULL COPY IS MADE AVAILABLE TO THE BOARD OF GOVERNORS |

| Identifier | Return Reference | Explanation |
|------------|-------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| | FORM 990, PART VI, SECTION B, LINE 12C | <p>THE GOVERNOR OR ORGANIZATIONAL MANAGER SHALL REVEAL THE POTENTIAL CONFLICT, IN WRITING TO THE AAJ PRESIDENT, UNLESS THE PRESIDENT IS THE GOVERNOR IN QUESTION, IN WHICH CASE IT SHALL BE DISCLOSED TO THE AAJ PRESIDENT ELECT. THE WRITTEN DISCLOSURE SHALL INCLUDE, AT A MINIMUM, THE FOLLOWING:</p> <ul style="list-style-type: none"> I. THE NATURE OF THE TRANSACTION. II. THE TERMS AND CONDITIONS OF THE TRANSACTION, INCLUDING MONEY OR OTHER BENEFITS FLOWING TO THE GOVERNOR, THE ORGANIZATIONAL MANAGER OR THE OTHER DISQUALIFIED PERSON. III. TO THE EXTENT THAT IT IS A DISQUALIFIED PERSON AND NOT AN ORGANIZATIONAL MANAGER OR GOVERNOR, THE NAME, ADDRESS AND RELATIONSHIP OF THE DISQUALIFIED PERSON TO THE ORGANIZATIONAL MANAGER OR GOVERNOR AND THE EXTENT OF THAT PERSON'S INTEREST IN THE TRANSACTION. IV. ANY OTHER INFORMATION REASONABLY REQUESTED BY THE PRESIDENT OR PRESIDENT ELECT. <p>IN THE EVENT OF ANY POTENTIAL CONFLICT OF INTEREST BETWEEN THE AAJ AND ITS GOVERNORS, ORGANIZATIONAL MANAGERS, OR OTHER DISQUALIFIED PERSONS, NO TRANSACTION WILL BE CONSUMMATED IF:</p> <ul style="list-style-type: none"> I. THE TRANSACTION IS NOT BASED UPON FAIR MARKET VALUE, INCLUDING REASONABLE COMPENSATION WITH RESPECT TO ANY ORGANIZATIONAL MANAGER WHO IS AN EMPLOYEE, OR, II. ANY TRANSACTION IN WHICH THE GOVERNOR, ORGANIZATIONAL MANAGER OR OTHER DISQUALIFIED PERSON RECEIVES A PERCENTAGE OF THE REVENUES OF THE ASSOCIATION. |

| Identifier | Return Reference | Explanation |
|------------|----------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| | FORM 990, PART VI, SECTION B, LINE 15A | THE CEO'S COMPENSATION IS REVIEWED AND APPROVED BY A BOARD COMMITTEE ON AN ANNUAL BASIS. AN INDEPENDENT COMPENSATION CONSULTANT USING COMPARABLE SALARY DATA IS UTILIZED. COMPENSATION FOR OTHER INDIVIDUALS IS REVIEWED AND APPROVED BY MANAGEMENT, USING COMPARABLE DATA FROM SITES LIKE GUIDESTAR.ORG OR SALARYRATE.COM. |

| Identifier | Return Reference | Explanation |
|------------|---------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| | FORM 990, PART VI, SECTION C, LINE 19 | THE GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY , AND AUDITED FINANCIAL STATEMENTS ARE NOT GENERALLY MADE AVAILABLE TO THE GENERAL PUBLIC, BUT IF REQUESTS FOR COPIES OF THESE DOCUMENTS WERE TO BE RECEIVED, THE ORGANIZATION WOULD CONSIDER MAKING THEM AVAILABLE TO THE REQUESTOR |

| Identifier | Return Reference | Explanation |
|----------------------------------------|---------------------------|--------------------------------------------------------------------------------------------------------------------------|
| CHANGES IN NET ASSETS OR FUND BALANCES | FORM 990, PART XI, LINE 5 | PRIOR PERIOD ADJUSTMENTS -276,450 PENSION BENEFIT OTHER THAN PERIODIC 212,125 TOTAL TO FORM 990, PART XI, LINE 5 -64,325 |

| Identifier | Return Reference | Explanation |
|------------|-----------------------------|-----------------------------------------------------------------|
| | FORM 990, PART XII, LINE 2C | THE AUDIT OVERSIGHT PROCESS HAS NOT CHANGED FROM THE PRIOR YEAR |

SCHEDULE R
(Form 990)

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.
▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2010

Open to Public Inspection

Name of the organization
AMERICAN ASSOCIATION FOR JUSTICE

Employer identification number
04-2114561

Part I

Identification of Disregarded Entities (Complete if the organization answered "Yes" on Form 990, Part IV, line 33.)

| (a) Name, address, and EIN of disregarded entity | (b) Primary activity | (c) Legal domicile (state or foreign country) | (d) Total income | (e) End-of-year assets | (f) Direct controlling entity |
|--------------------------------------------------------------------------------------------|-----------------------------------------|--------------------------------------------------|---------------------|---------------------------|----------------------------------|
| (1) CAPITOL JUSTICE LLC 777 6TH STREET NW STE 200 WASHINGTON, DC 20001 04-2114561 | HOLDS INTEREST IN HEADQUARTERS BUILDING | DC | 0 | 0 | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

Part II

Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.)

| (a) Name, address, and EIN of related organization | (b) Primary activity | (c) Legal domicile (state or foreign country) | (d) Exempt Code section | (e) Public charity status (if section 501(c)(3)) | (f) Direct controlling entity | (g) Section 512(b)(13) controlled organization | |
|-------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------|--------------------------------------------------|----------------------------|-----------------------------------------------------|----------------------------------|---------------------------------------------------|----|
| | | | | | | Yes | No |
| (1) THE AAJ ROBERT L HABUSH ENDOWMENT 777 6TH STREET NW STE 200 WASHINGTON, DC 20001 52-1964499 | FUNDING BASE FOR EDUCATIONAL PROGRAMS, RESEARCH AND SCHOLARSHIPS | DC | 501(C)(3) | 509(A)(3) | | Yes | |
| (2) TRIAL LAWYERS CARE 777 6TH STREET NW STE 200 WASHINGTON, DC 20001 52-2346888 | HELP 9/11 VICTIMS OBTAIN PAYMENT FROM THE FEDERAL 9/11 COMPENSATION FUND | DC | 501(C)(3) | 509(A)(1) | | Yes | |
| (3) AAJ POLITICAL ACTION COMMITTEE 777 6TH STREET NW STE 200 WASHINGTON, DC 20001 52-6161471 | POLITICAL ACTION COMMITTEE | DC | 527 | | | Yes | |
| (4) AMERICAN ASSOCIATION OF JUSTICE EDUCATION FUND 777 6TH STREET NW STE 200 WASHINGTON, DC 20001 52-1105720 | EDUCATIONAL FOUNDATION | DC | 501(C)(3) | 509(A)(1) | | Yes | |
| (5) CIVIL JUSTICE FOUNDATION 777 6TH STREET NW STE 200 WASHINGTON, DC 20001 52-1477114 | SAFEGUARD CONSTITUTIONAL RIGHTS | DC | 501(C)(3) | 509(A)(1) | | Yes | |
| | | | | | | | |
| | | | | | | | |

Part III

Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.)

| (a) Name, address, and EIN of related organization | (b) Primary activity | (c) Legal domicile (state or foreign country) | (d) Direct controlling entity | (e) Predominant income (related, unrelated, excluded from tax under sections 512- 514) | (f) Share of total income | (g) Share of end-of-year assets | (h) Disproportionate allocations? | | (i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065) | (j) General or managing partner? | | (k) Percentage ownership |
|----------------------------------------------------------|-------------------------|--------------------------------------------------------------|-------------------------------------|-------------------------------------------------------------------------------------------------------|------------------------------|---------------------------------------|-----------------------------------------|----|-------------------------------------------------------------------------|-------------------------------------------|----|--------------------------------|
| | | | | | | | Yes | No | | Yes | No | |
| | | | | | | | | | | | | |
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Part IV

Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.)

| (a) Name, address, and EIN of related organization | (b) Primary activity | (c) Legal domicile (state or foreign country) | (d) Direct controlling entity | (e) Type of entity (C corp, S corp, or trust) | (f) Share of total income | (g) Share of end-of-year assets | (h) Percentage ownership |
|--------------------------------------------------------------------------------------------------------|-------------------------|-----------------------------------------------------------|-------------------------------------|--------------------------------------------------------|------------------------------|------------------------------------------|--------------------------------|
| (1) THE ATLA GROUP INSURANCE TRUST 777 6TH STREET NW SUITE 200 WASHINGTON, DC20001 52-6231357 | INSURANCE TRUST | DC | | T | 1,563 | | 100 000 % |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
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| | | | | | | | |

Part V

Transactions With Related Organizations (Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35, 35A, or 36.)

Note. Complete line 1 if any entity is listed in Parts II, III or IV

1

During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

a

Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity

b

Gift, grant, or capital contribution to other organization(s)

c

Gift, grant, or capital contribution from other organization(s)

d

Loans or loan guarantees to or for other organization(s)

e

Loans or loan guarantees by other organization(s)

f

Sale of assets to other organization(s)

g

Purchase of assets from other organization(s)

h

Exchange of assets

i

Lease of facilities, equipment, or other assets to other organization(s)

j

Lease of facilities, equipment, or other assets from other organization(s)

k

Performance of services or membership or fundraising solicitations for other organization(s)

l

Performance of services or membership or fundraising solicitations by other organization(s)

m

Sharing of facilities, equipment, mailing lists, or other assets

n

Sharing of paid employees

o

Reimbursement paid to other organization for expenses

p

Reimbursement paid by other organization for expenses

q

Other transfer of cash or property to other organization(s)

r

Other transfer of cash or property from other organization(s)

Yes

No

1a

1b

1c

1d

1e

1f

1g

1h

1i

1j

1k

1l

1m

1n

1o

1p

1q

1r

No

No

No

No

No

No

No

No

No

No

No

No

No

Yes

Yes

No

No

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds

| (a) Name of other organization | (b) Transaction type(a-r) | (c) Amount involved | (d) Method of determining amount involved |
|-----------------------------------|---------------------------------|------------------------|-------------------------------------------------|
| (1) ROBERT L HABUSH ENDOWMENT | O | 19,696 | CASH |
| (2) AAJ EDUCATION FUND | O | 154,102 | CASH |
| (3) AAJ EDUCATION FUND | N | 667,332 | CASH |
| (4) CIVIL JUSTICE FOUNDATION | P | 7,089 | CASH |
| (5) | | | |
| (6) | | | |

Schedule R (Form 990) 2010

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

[illegible]

Part VII **Supplemental Information**

Complete this part to provide additional information for responses to questions on Schedule R (see instructions)

| Identifier | Return Reference | Explanation |
|------------|------------------|-------------|
|------------|------------------|-------------|

Additional Data

Software ID:

Software Version:

EIN: 04-2114561

Name: AMERICAN ASSOCIATION FOR JUSTICE

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

| (A) Name and Title | (B) Average hours per week | (C) Position (check all that apply) | | | | | | | (D) Reportable compensation from the organization (W- 2/1099-MISC) | (E) Reportable compensation from related organizations (W- 2/1099- MISC) | (F) Estimated amount of other compensation from the organization and related organizations |
|-------------------------------------------|----------------------------------------|-------------------------------------------|-----------------------|---------|--------------|---------------------------------|--------|---|-----------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------|
| | | Individual trustee or director | Institutional Trustee | Officer | Key employee | Highest compensated employee | Former | | | | |
| C GIBSON VANCE PRESIDENT | 1 00 | X | | X | | | | 0 | 0 | 0 | |
| GARY PAUL PRESIDENT-ELECT | 1 00 | X | | X | | | | 0 | 0 | 0 | |
| MARY ALICE MCLARTY VICE PRESIDENT | 1 00 | X | | X | | | | 0 | 0 | 0 | |
| J BURTON LEBLAC SECRETARY | 1 00 | X | | X | | | | 0 | 0 | 0 | |
| RHONDA HILL WILSON TREASURER | 1 00 | X | | X | | | | 0 | 0 | 0 | |
| LARRY TAWWATER PARLIAMENTARIAN | 1 00 | X | | X | | | | 0 | 0 | 0 | |
| ANTHONY TARRICONE IMMEDIATE PAST PRES | 1 00 | X | | | | | | 0 | 0 | 0 | |
| ADAM MALONE BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 | |
| ADRIANNE E WALVOORD BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 | |
| ALBERTO J PEREZ HERNANDEZ BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 | |
| ALEXA D'AMATO BARRERA BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 | |
| ALLAN KANNER BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 | |
| ANDREW P KREMBS BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 | |
| ANTONIO M ROMANUCCI BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 | |
| ARTHUR E VERTLIEB BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 | |
| BENEDICT P MORELLI BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 | |
| BEVERLY L BOVE BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 | |
| BRADLEY C WEST BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 | |
| BRIAN D NETTLES BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 | |
| BRIAN J MCKEEN BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 | |
| BRUCE H STERN BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 | |
| BRUCE MARTIN PLAXEN BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 | |
| C RICHARD HENRIKSEN JR BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 | |
| CHARLES J ZAUZIG III BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 | |
| CHESLEY F CROSBIE BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 | |

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

| (A) Name and Title | (B) Average hours per week | (C) Position (check all that apply) | | | | | | | (D) Reportable compensation from the organization (W- 2/1099-MISC) | (E) Reportable compensation from related organizations (W- 2/1099- MISC) | (F) Estimated amount of other compensation from the organization and related organizations |
|----------------------------------------|----------------------------------------|-------------------------------------------|-----------------------|---------|--------------|---------------------------------|--------|---|-----------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------|
| | | Individual trustee or director | Institutional Trustee | Officer | Key employee | Highest compensated employee | Former | | | | |
| CHRISTOPHER PLACITELLA BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 | |
| CHRISTOPHER D GLOVER BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 | |
| CHUCK R MCRAE BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 | |
| CLINT G DOCKEN BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 | |
| CLINT LEE SARGENT BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 | |
| CLIVE AW GARNER BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 | |
| CONRAD S P WILLIAMS BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 | |
| D MITCHELL GARRETT JR BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 | |
| DAN LYKINS BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 | |
| DANIEL G KAGAN BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 | |
| DANIEL J BROWN BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 | |
| DARREL WAHERIN BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 | |
| DAVID EFRON BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 | |
| DAVID A ROSEN BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 | |
| DAVID B GOLOMB BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 | |
| DAVID R BLISS BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 | |
| DAVID R BOSSART BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 | |
| DAVID WM BOONE BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 | |
| DEBBIE D BRANSON BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 | |
| DERRICK L WALKER BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 | |
| DONALD H BESKIND BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 | |
| DONNA M MACKENZIE BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 | |
| DOUGLAS B ABRAMS BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 | |
| DOUGLAS K SHEFF BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 | |
| E DREW BRITCHER BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 | |

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

| (A) Name and Title | (B) Average hours per week | (C) Position (check all that apply) | | | | | | | (D) Reportable compensation from the organization (W- 2/1099-MISC) | (E) Reportable compensation from related organizations (W- 2/1099- MISC) | (F) Estimated amount of other compensation from the organization and related organizations |
|-------------------------------------|----------------------------------------|-------------------------------------------|-----------------------|---------|--------------|---------------------------------|--------|---|-----------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------|
| | | Individual trustee or director | Institutional Trustee | Officer | Key employee | Highest compensated employee | Former | | | | |
| EDWARD H MOORE JR BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 | |
| EDWARD H ZEBERSKY BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 | |
| EDWARD J VOPAL BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 | |
| EDWIN E WALLIS III BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 | |
| EDWIN L WALLACE BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 | |
| ELISE R SANGUINETTI BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 | |
| FINIS E WILLIAMS BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 | |
| FRANK VERDERAME BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 | |
| FREDERIC N HALSTROM BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 | |
| FREDERICK SCHENK BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 | |
| GALE D PEARSON BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 | |
| GARY C ROBB BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 | |
| GARY R WILL BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 | |
| GARY VERNON LAUK BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 | |
| GILBERT T ADAMS JR BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 | |
| GREGORY S CUSIMANO BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 | |
| HENRY M SHIELDS BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 | |
| HERBERT J FRIEDMAN BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 | |
| HERMAN J RUSSOMANNO BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 | |
| INGRID M EVANS BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 | |
| J KYLE BACHUS BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 | |
| JACK B BALDWIN BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 | |
| JAMES D CUMING BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 | |
| JAMES E FRASIER BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 | |
| JAMES E GIRARDS BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 | |

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

| (A) Name and Title | (B) Average hours per week | (C) Position (check all that apply) | | | | | | (D) Reportable compensation from the organization (W- 2/1099-MISC) | (E) Reportable compensation from related organizations (W- 2/1099- MISC) | (F) Estimated amount of other compensation from the organization and related organizations |
|-----------------------------------------|----------------------------------------|-------------------------------------------|-----------------------|---------|--------------|---------------------------------|--------|-----------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------|
| | | Individual trustee or director | Institutional Trustee | Officer | Key employee | Highest compensated employee | Former | | | |
| JAMES H THOMPSON JR BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 |
| JAMES MARVIN MULLIS JR BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 |
| JAMES W VITITOE BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 |
| JEFFREY R HARRIS BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 |
| JEREMY WALTERS BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 |
| JEROME F O'NEILL BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 |
| JIM LEVENTHAL BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 |
| JOHN D COONEY BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 |
| JOHN E OSBORNE BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 |
| JOHN EDDIE WILLIAMS JR BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 |
| JOHN F FAY BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 |
| JOHN L RICCOLO BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 |
| JOHN M PARISI BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 |
| JOHN W KITCHENS BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 |
| JOSEPH P AWAD BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 |
| JOSEPH W WEIK BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 |
| JUDITH A HULL BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 |
| JULIE BRAMAN KANE BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 |
| K GLENDA CAMERON BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 |
| KALMAN SAMUELS BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 |
| KAREN KOEHLER BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 |
| KAREN BARTH MENZIES BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 |
| KATHLEEN FLYNN PETERSON BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 |
| KATHLEEN L NASTRI BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 |
| KATHRYN H CLARKE BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 |

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

| (A) Name and Title | (B) Average hours per week | (C) Position (check all that apply) | | | | | | | (D) Reportable compensation from the organization (W- 2/1099-MISC) | (E) Reportable compensation from related organizations (W- 2/1099- MISC) | (F) Estimated amount of other compensation from the organization and related organizations |
|---------------------------------------|----------------------------------------|-------------------------------------------|-----------------------|---------|--------------|---------------------------------|--------|---|-----------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------|
| | | Individual trustee or director | Institutional Trustee | Officer | Key employee | Highest compensated employee | Former | | | | |
| KATHRYN R BAYLESS BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 | |
| KENNETH K VUYLSTEKE BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 | |
| KENNETH L PEDERSEN BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 | |
| KIRK WAGAR BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 | |
| LAIRD M OZMON BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 | |
| LAWRENCE A ANDERSON BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 | |
| LAWRENCE M SIMON BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 | |
| LEE J ROHN BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 | |
| LEE S GOLDSMITH BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 | |
| LENORE KRAMER BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 | |
| LINDA MILLER ATKINSON BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 | |
| MARC BOULANGER BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 | |
| MARC S HARDING BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 | |
| MARIA S DIAMOND BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 | |
| MARK GEMMA BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 | |
| MARK KITRICK BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 | |
| MARK A HARVEY BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 | |
| MARK S DAVIS BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 | |
| MARTIN EDELMAN BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 | |
| MARTIN HEALY JR BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 | |
| MARY BETH RAMEY BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 | |
| MATTHEW A CARTWRIGHT BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 | |
| MATTHEW L SHARP BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 | |
| MEL C ORCHARD III BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 | |
| MELISSA R SMITH BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 | |

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

| (A) Name and Title | (B) Average hours per week | (C) Position (check all that apply) | | | | | | | (D) Reportable compensation from the organization (W- 2/1099-MISC) | (E) Reportable compensation from related organizations (W- 2/1099- MISC) | (F) Estimated amount of other compensation from the organization and related organizations |
|----------------------------------------|----------------------------------------|-------------------------------------------|-----------------------|---------|--------------|---------------------------------|--------|---|-----------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------|
| | | Individual trustee or director | Institutional Trustee | Officer | Key employee | Highest compensated employee | Former | | | | |
| MICHAEL D BROWN BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 | |
| MICHAEL J FOLEY BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 | |
| MICHAEL R HUGO BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 | |
| MORGAN E WELCH BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 | |
| MORGAN G ADAMS BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 | |
| O FAYRELL FURR JR BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 | |
| P GREGORY CROSS BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 | |
| PATRICK C BARRY BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 | |
| PATRICK H LEPLEY BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 | |
| PATRICK M REGAN BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 | |
| PAUL BYRD BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 | |
| PERRY WEITZ BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 | |
| PETER CARTER BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 | |
| PETER J HINTON BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 | |
| PHILLIP PAUL WEIDNER BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 | |
| RALPH M CLOAR JR BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 | |
| RANDI MCGINN BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 | |
| RAYMOND F WAGNER BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 | |
| REBECCA MCRAE LANGSTON BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 | |
| REGINALD A WATSON BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 | |
| RICHARD D LAWRENCE BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 | |
| RICHARD W SCHULTE BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 | |
| ROBERT E CARTWRIGHT JR BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 | |
| ROBERT E KLEINPETER BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 | |
| ROBERT K JENNER BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 | |

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

| (A) Name and Title | (B) Average hours per week | (C) Position (check all that apply) | | | | | | (D) Reportable compensation from the organization (W- 2/1099-MISC) | (E) Reportable compensation from related organizations (W- 2/1099- MISC) | (F) Estimated amount of other compensation from the organization and related organizations |
|------------------------------------|----------------------------------------|-------------------------------------------|-----------------------|---------|--------------|---------------------------------|--------|-----------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------|
| | | Individual trustee or director | Institutional Trustee | Officer | Key employee | Highest compensated employee | Former | | | |
| ROBERT L JASKULSKI BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 |
| ROBERT L SACHS JR BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 |
| RODNEY G GREGORY BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 |
| RON MORGAN BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 |
| RONALD J BALACKO BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 |
| RONALD J BERKE BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 |
| RONALD L MOTLEY BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 |
| RUSSELL SMITH BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 |
| RUSSELL W BUDD BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 |
| SAMUEL W LANHAM JR BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 |
| SANDRA H ROBINSON BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 |
| SCOTT R BICKFORD BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 |
| SEAN C DOMNICK BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 |
| SHOSHANA T BOOKSON BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 |
| SIDNEY W GILREATH BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 |
| SIMON MORRISON BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 |
| SIMONA A FARRISE BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 |
| SOL H WEISS BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 |
| SONIA P CHAISSON BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 |
| STACI M YANDLE BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 |
| STEPHAN H PESKIN BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 |
| STEPHEN A MARINO BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 |
| STEPHEN L SIMONTON BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 |
| STEVEN E RILEY JR BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 |
| STEVEN L NICHOLAS BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 |

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

| (A) Name and Title | (B) Average hours per week | (C) Position (check all that apply) | | | | | | (D) Reportable compensation from the organization (W-2/1099-MISC) | (E) Reportable compensation from related organizations (W- 2/1099-MISC) | (F) Estimated amount of other compensation from the organization and related organizations |
|-------------------------------------------------|-------------------------------|----------------------------------------|-----------------------|---------|--------------|------------------------------|--------|----------------------------------------------------------------------|----------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------|
| | | Individual trustee or director | Institutional Trustee | Officer | Key employee | Highest compensated employee | Former | | | |
| STEWART J EISENBERG BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 |
| STEWART M CASPER BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 |
| T CARROLL MCCARTHY JR BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 |
| TERENCE R QUINN BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 |
| THOMAS D'AMORE BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 |
| THOMAS A DICKSON BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 |
| THOMAS L STAACK BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 |
| THOMAS M DEMPSEY BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 |
| THOMAS R WATSON BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 |
| TOBI L MILLROOD BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 |
| TODD D SCHLOSSBERG BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 |
| VICKI R SLATER BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 |
| VINCENT M POWERS BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 |
| W COLEMAN ALLEN JR BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 |
| WADE E BYRD BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 |
| WARD M MERDES BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 |
| WAYNE D PARSONS BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 |
| WILLIAM A ROSSBACH BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 |
| WILLIAM R GARMER BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 |
| YVONNE M FLAHERTY BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 |
| MARY BERGE CHIEF FINANCIAL OFFICER | 40 00 | | | X | | | | 202,570 | 0 | 3,719 |
| LINDA LIPSEN CHIEF EXECUTIVE DIRECTOR | 38 00 | | | X | | | | 403,737 | 21,249 | 31,365 |
| THOMAS HENDERSON INTERIM CEO | 38 00 | | | X | | | | 213,750 | 11,250 | 0 |
| ANJALI JESSERAMSING EXECUTIVE VICE PRESIDENT | 20 00 | | | | X | | | 89,886 | 89,886 | 25,798 |
| DANIEL COHEN GENERAL COUNSEL | 38 00 | | | | X | | | 204,610 | 10,769 | 19,702 |

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

| (A) Name and Title | (B) Average hours per week | (C) Position (check all that apply) | | | | | | (D) Reportable compensation from the organization (W-2/1099-MISC) | (E) Reportable compensation from related organizations (W-2/1099-MISC) | (F) Estimated amount of other compensation from the organization and related organizations |
|-------------------------------------------------|-------------------------------|----------------------------------------|-----------------------|---------|--------------|------------------------------|--------|----------------------------------------------------------------------|---------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------|
| | | Individual trustee or director | Institutional Trustee | Officer | Key employee | Highest compensated employee | Former | | | |
| SUSAN STEINMAN DIRECTOR OF PUBLIC POLICY | 40 00 | | | | | X | | 139,399 | 0 | 17,907 |
| JOHN BOWMAN DIRECTOR, FEDERAL RELATIONS | 40 00 | | | | | X | | 138,083 | 0 | 5,232 |
| MARTIN GERICH DIRECTOR, INFORMATION TECH | 32 00 | | | | | X | | 104,331 | 26,083 | 12,885 |
| JULIE SHOOP DIRECTOR OF PUBLICATIONS, EDITOR | 40 00 | | | | | X | | 118,410 | 0 | 8,453 |
| SANDRA MOHR CONTROLLER | 32 00 | | | | | X | | 85,431 | 21,358 | 18,875 |
| JON HABER FORMER CEO | 0 00 | | | | | | X | 483,725 | 0 | 0 |